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CONFIRMATION NO. 7990

SERIAL NUMBER 10/625,862	FILING DATE 07/23/2003 RULE	CLASS 701	GROUP ART UNIT 3663	ATTORNEY DOCKET NO. 4778.001
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APPLICANTS

Eliezer Sanchez, Homestead, FL;

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** CONTINUING DATA

Yes TC

This appln claims benefit of 60/399,325 07/23/2002

** FOREIGN APPLICATIONS

None TC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 01/05/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	FL	3	10-14	1
Examiner's Signature <i>TC</i> Initials				

ADDRESS

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TITLE

Electronic localizing protection device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
RECEIVED		

375		<input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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